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August 2, 2018

Seema Verma, MPH
Administrator,
Centers for Medicare and Medicaid Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Administrator Verma,

I am writing to follow up regarding my serious concerns with the Arizona Health Care Cost Containment System (AHCCCS) "AHCCCS Works," 1115 Waiver Amendment Request, seeking authority to implement work requirements and a five-year maximum lifetime benefit limit for a portion of the Medicaid population. It has been brought to my attention that there has not been a consultation process with tribal governments in Arizona regarding this waiver request. I request that Centers for Medicare and Medicaid Services (CMS) immediately begin a meaningful consultation process with tribal governments in Arizona.

As my previous letter mentions, linking health coverage to a work requirement will undermine access to health care and contradict the purpose of Title XIX of the Social Security Act and Congress's longstanding intent for the Medicaid program. Work requirements force resources to be allocated away from providing care to recipients, while simultaneously reducing the number of people served. Given that a federal judge struck down Kentucky work requirements, ruling that they are "arbitrary and capricious", CMS should deny Arizona's similar request. While I urge CMS to comply with federal law by denying the work requirements, I continue to be concerned that CMS has also failed to conduct a proper tribal consultation process throughout this waiver process.

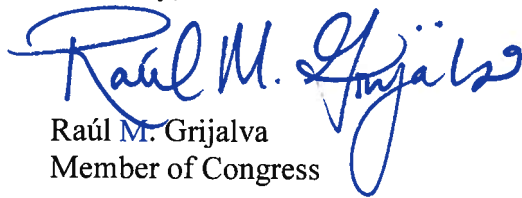
The United States and tribal governments interact on a government-to-government basis and U.S. Department of Health and Human Services (HHS) tribal consultation policy states, "that true and effective consultation shall result in information exchange, mutual understanding, and informed decision-making on behalf of the Tribal governments involved and the Federal Government."¹ Further, the HHS tribal consultation policy is intended to ensure access to critical health and human services through meaningful government to government consultation. Any policy implications without adherence to the HHS tribal consultation policy, will drastically

¹ U.S. Department of Health and Human Services, Tribal Consultation Policy. Retrieved from: <https://www.hhs.gov/sites/default/files/iea/tribal/tribalconsultation/hhs-consultation-policy.pdf>

affect tribes and infringes upon the federal trust responsibility between tribal and federal governments.

This waiver could have an impact on the more than 150,000 American Indians and Alaska Natives enrolled in the Arizona Medicaid program, it is unacceptable for the CMS to permit any waiver moving forward that will negatively impact this population. In addition to threatening tribal sovereignty, the changes could result in reduced funds available to the Indian Health Service (IHS). It is essential the U.S. government uphold its federal trust responsibility to tribal communities; for that reason, I urge HHS adhere to its tribal consultation policy by immediately conducting a consultation process regarding the implications of "AHCCCS works" to ensure tribal communities engage in meaningful consultation with the federal government

Sincerely,

A handwritten signature in blue ink that reads "Raúl M. Grijalva". The signature is fluid and cursive, with the first name "Raúl" being the most prominent part.

Raúl M. Grijalva
Member of Congress